

ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

01/26/2004

This is to acknowledge that you have filed a **Notification of Hazardous Waste Activity** for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

NJR000048231

INSTALLATION NAME •

CENTRAL HIGH SCHOOL

CHOPEWELL VALLEY

INSTALLATION ADDRESS

259 PENNINGTON-TITUSVILLE RD LOT 1 BLOCK 63.01 PENNINGTON, NJ 08534

MAILING ADDRESS

259 PENNINGTON-TITUSVILLE RD LOT 1 BLOCK 63.01 PENNINGTON, NJ 08534

EPA Form 8700-12AB (4-80)

USEPA - REGION 2 RCRA Programs Branch 290 Broadway, 22nd Floor New York, NY 10007-1866

ATTN: RCRA NOTIFICATIONS

Tel: (212) 637-4106 Fax: (212) 637-3056

TO: CENTRAL HIGH SCHOOL

or Current Occupant

ATTN: DOUGLAS BROWER

259 PENNINGTON-TITUSVILLE RD

LOT 1 BLOCK 63.01 PENNINGTON, NJ, 08534

Form Approved, OMB No. 2050-0028 Expires 12/31/02 GSA No. 0246-EPA-OT

Please refer to Section V. Line-by-Line Instructions for Completing EPA Form 8700-12 before Completing this form. The

Notification of Regulated

Date Received (For Official Use Only)

Installation's EPA ID Number (Mark 'X' in the appropriate box) A. Initial Notification B. Subsequent Notification Complete item C)			**	PR				1
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II. Name of Installation (Include company and specific site name)								
CENTRAL H16H SCHOOL			2000000000			T		
Ill. Location of Installation (Physical address not P.O. Box or Houte Number)								
Street								
2 5 9 P E N N I N G T O N - T I T U S V I Street (Continued)	L	L	ϵ		R	. 0	A	D
	ļ	T		,	,	<u>,</u>	,	
City or Tour								
P C V V V N C T O V V	*******	1	T.,	T	T	T	T	T
County Code County Name	5	3	14	=				
0 2 1 M E R C E R				T	T	T	T	
IV. Installation: Mailing Address (See Instructions)								
Street or P.O. Box								
				T	T	T	T	
City or Town State Zip Coo	de							
			T	T	•			
V. Installation Contact (Person to be contacted regarding waste activities at site)								
Name (Last) (First)								
BROWER DOVGLAS								
Job Title Phone Number (Area Code a)	nd N	Numt	ber)				ex.	C.
VI. Installation Contact Address (See Instructions)	_	- 4	0	0	0	3	52	8
A. Contact Address Location, Mailing B. Street or P.O. Box								
	T	Т	Τ	T	T	T	T	Τ
City or Town State Zip Co.	da							
			Τ	Τ_	T	T	T	T
VII. Ownership (See Instructions)								
A. Name of Installation's Legal Owner								
HOPEWELL VALLEY REGIONAL		SCI	1100	O L	D	ıst	A1C	F
Street, P.O. Bax, or Route Number							1	
425 SOUTH MAIN STREET				1				
City or Town State Zip Coo	10000000							
	5		4	_	00-00-00			
Phone Number (Area Code and Number) B. Land Type C. Owner Type D. Change or Indicate D. Yes.		vner No∫	1	Month		Cha Day	Y	ear

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		ID - For Official Use Only
VIII. Type of Regulated Waste Activity (M	ark 'X' in the appropriate boxes. Refer to li	nstructions)
A. Hazardous W		C. Used Oil Management Activities
1. Generator (See Instructions) a. Greater than 1000kg/mo (2,200 lbs.) b. 100 to 1000 kg/mo (220-2,200 lbs.) c. Less than 100 kg/mo (220 lbs) 2. Transporter (Indicate Mode in boxes 1-5 below) a. For own waste only b. For commercial purposes Mode of Transportation 1. Air 2. Rail 3. Highway 4. Water 5. Other - specify	required for this activity, se instructions.	at 1. Used Oil Transporter/Transfer Facility - Indicate Type(s) of Activity(ies) a. Transporter b. Transfer Facility 2. Used Oil Processor/Re-refiner Indicate Type(s) of Activity(ies) a. Processor b. Re-refiner Off-Specification Used Oil Burne
B. Universal W	Vaste Activity	
Large Quantity Handler of Universal Wa	iste	
IX. Description of Hazardous Wastes (Us	e additional sheets if necessary)	
A. Listed Hazardous Wastes. (See 40 CF) 1 2 7 8 B. Characteristics of Nonlisted Hazardou nonlisted hazardous wastes your installat to list more than 4 toxicity characteristic via (D001) (D002) (D003) Characteristic (D001) (D003) Characteristic via (D001) (D003) (D003) Characteristic via (D001) (D003) Characteristic via (D001) (D003) (D003) Characteristic via (D001) (D003) (D003) Characteristic via (D003) Characteristic via (D003) (D003) Characteristic via	3 4 9 10 Is Wastes. (Mark 'X' in the boxes corres) ion handles; See 40 CFR Parts 261,20 - 26 vaste codes.) (List specific EPA hazardous waste number(s)	5 6 11 12 12
C. Other Wastes. (State-regulated or other	wastes requiring a handler to have an I.D. 3 4	number; See instructions.) 5 6
X. Certification		
I certify under penalty of law that this document a system designed to assure that qualified per the person or persons who manage the system submitted is, to the best of my knowledge and submitting false information, including the po	m, or those persons directly responsible f	for gathering the information, the information
Signature Brown	Name and Official Title (Type or p Douglas W. Brower, Supervisor	
XI. Comments		
Note: Mail completed form to the appropriate i	EPA Regional or State Office. (See Sectio	n IV of the booklet for addresses.)



PARS ENVIRONMENTAL INC. ROBBINSVILLE, NJ 08691 HMENTA **6A SOUTH GOLD DRIVE**

FAX - (609) 890-9116 JAN 23 AM 8: 12

RCRA PROGRAMS LETTER OF TRANSMITTAL

DATE:

January 20, 2004

TO:

USEPA - DEPP - RPB

ATTN:

Mr. Jack Hoyt

FROM:

Ravi Jarecha, CET

RE:

Notification of Regulated Waste Activity

PARS PROJECT NO: 612-34

Enclosed please find: ___ Report ___ Letter ___ Proposal _X_ Other

No. of Copies Enclosed:

This is being sent to you: _X_ For approval ___ For your use ___ For Completion

Enclosed please find the EPA Notification of Regulated Waste Activity Form for Central High School.

If you have any questions regarding this matter please feel free to contact me at (609) 890-7277

Sincerely,

PARS ENVIRONMENTAL, Inc.

Ravi Jarecha, CET

Director, Health & Safety Division

cc: Douglas Brower, HVRSD